

PUBLIC VOUCHER FOR PURCHASE AND  
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. \_\_\_\_\_  
Bu. Vou. No. 2395

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. \_\_\_\_\_

To \_\_\_\_\_

(Payee)

(Address)

(City)

(State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)  Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Costs				\$9,557.	30

PAYMENT:

Complete ☐  
Partial ☐  
Final ☐

Use continuation sheet(s) if necessary

Shipped from \_\_\_\_\_ to \_\_\_\_\_ Weight \_\_\_\_\_ Government B/L No. \_\_\_\_\_ Total \$9,557.30

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences \_\_\_\_\_

Date 2-11-59 \*Payee

Required when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for

(Signature or initials) *EE*

\$9,557.30

Per \_\_\_\_\_

Title \_\_\_\_\_

Contract No. A-101 Date \_\_\_\_\_ Req. No. \_\_\_\_\_ Date \_\_\_\_\_ Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ \_\_\_\_\_

† \_\_\_\_\_

(Authorized Certifying Officer)

By \_\_\_\_\_

SIGN  
ORIGINAL  
ONLY

Title \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ \_\_\_\_\_ on Treasurer of the United States in favor of  
{ Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_ Payee \_\_\_\_\_ (payee named above.)  
(Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporation must be given, as in the following examples: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.  
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_\_\_\_\_", and over his official title.

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FORM STL - 660

## ACCOUNTS PAYABLE

DATE	TO	FROM	REMARKS
1951	...	...	...

2/C1/59

**BATCH**

No.	Mo.
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
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88	88
89	89
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91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

**INVOICE**  
**NUMBER**

NUMBER

**PURCHASE  
ORDER**

ORDER

CHECK  
NUMBER

NUMBER

PAYMENT DATE	Mo.   Day	

PAYMENT DATE
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Vendor	Number
1	1
2	2
3	3
4	4
5	5
6	6
7	7
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9	9
10	10
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12	12
13	13
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84	84
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87	87
88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

Number

GROSS  
AMOUNT

**Private**

**DISCOUNT**

Cost	100
Class	100

TR.	ODE
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TR.	ODE
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CHARGE	

DISTR

## **CONTRIBUTION**

NET AMOUNT

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10	10	10
11	11	11
12	12	12

	*	*
proved	*	*
55	55	
25	25	
55	55	
63	63	
71	71	

## ACCOUNTS PAYABLE

WEEKLY DET DISR DATE

2/01/59

BATCH			INVOICE NUMBER	PURCHASE ORDER	CHECK NUMBER	PAYMENT DATE		Vendor Number	GROSS AMOUNT	DISCOUNT	COST CENTER			CHARGE DISTRIBUTION			NET AMOUNT	
No.	Mo.	Day				Yr.	Mo.				Day	Maj.	Int.	Sub.	Account	M.J.O.		S.O.
77	01	26	9	3250	2820		01	30	424			00	00	00	12501	3032	58	1028
95	01	28	9	20220	4562		02	02	165			00	00	00	12501	3032	58	103572
97	01	26	9	16210	46255		02	02	171			00	00	00	12501	3032	58	5440
87	01	28	9	16210	46255		02	02	171			00	00	00	12501	3032	58	16320
68	01	29	9	1192	3795	15622	17	63	1763			00	00	00	12501	3032	58	5300
97	01	30	9	1192	3795		02	03	2338			00	00	00	12501	3032	58	6300
																		125360
																		125360***X

## ACCOUNTS PAYABLE

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DATE \_\_\_\_\_

2/5/55

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12/17/1908

## ACCOUNTS PAYABLE

**THE RAMO-WOOLDRIDGE CORPORATION**

FORM STL - 660

WEEKLY SET CISTS	DATE
100	10/10/50
100	10/11/50
100	10/12/50
100	10/13/50
100	10/14/50
100	10/15/50
100	10/16/50
100	10/17/50
100	10/18/50
100	10/19/50
100	10/20/50
100	10/21/50
100	10/22/50
100	10/23/50
100	10/24/50
100	10/25/50
100	10/26/50
100	10/27/50
100	10/28/50
100	10/29/50
100	10/30/50
100	10/31/50

12/17/1908

[illegible]

2/01/59

## ACCOUNTS PAYABLE

THE RAMO-WOOLDRIDGE CORPORATION

FORM STL - 660

[illegible]

DATE \_\_\_\_\_

[illegible]

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2/01/59

## ACCOUNTS PAYABLE

THE RAMO-WOOLDRIDGE CORPORATION

FORM STL - 660

DATE	TIME	WEEKLY
10/10/19	10:00	10:00
10/11/19	10:00	10:00
10/12/19	10:00	10:00
10/13/19	10:00	10:00
10/14/19	10:00	10:00
10/15/19	10:00	10:00
10/16/19	10:00	10:00
10/17/19	10:00	10:00
10/18/19	10:00	10:00
10/19/19	10:00	10:00
10/20/19	10:00	10:00
10/21/19	10:00	10:00
10/22/19	10:00	10:00
10/23/19	10:00	10:00
10/24/19	10:00	10:00
10/25/19	10:00	10:00
10/26/19	10:00	10:00
10/27/19	10:00	10:00
10/28/19	10:00	10:00
10/29/19	10:00	10:00
10/30/19	10:00	10:00
10/31/19	10:00	10:00

DATE \_\_\_\_\_

[illegible]

Page 1

THE RAMO-WOOLDRIDGE CORPORATION

# ACCOUNTS PAYABLE

WEEKLY DET DISTR DATE

2/01/59

FORM STL-660

BATCH				INVOICE NUMBER	PURCHASE ORDER	CHECK NUMBER	PAYMENT DATE		Vendor Number	GROSS AMOUNT	DISCOUNT	CLASS	Cost Element	TR CODE	COST CENTER			CHARGE DISTRIBUTION			NET AMOUNT
No.	Mo.	Day	Yr.				Mo.	Day							Maj.	Int.	Sub.	Account	M.J.O.	S.O.	
82	01	27	0	11302	3777		02	02	47				1	50	25	00	00	12501	3093	65	2016
89	01	28	0	542459	3779		02	13	90				1	50	25	00	00	12501	3093	65	4830
89	01	28	0	543559	3779		02	13	90				1	50	25	00	00	12501	3093	65	650
87	01	28	0	1-325	46166		02	02	206				1	50	25	00	00	12501	3093	65	4015
89	01	22	0	3403	4109		02	19	1131				1	50	25	00	00	12501	3093	65	1500
92	01	29	0	47528	3828		02	03	290				1	50	25	00	00	12501	3093	65	975
																					14066*
																					14066**

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BATCH			INVOICE		PURCHASE	CHECK	PAYMENT		Vendor	GROSS	DISCOUNT	COST CENTER			CHARGE DISTRIBUTION				NET AMOUNT		
No.	Mo.	Day	Yr.	NUMBER	ORDER	NUMBER	Mo.	Day	Number	AMOUNT			Maj.	Int.	Sub.	Account	M.J.O.	S.O.	Work Order		
89	01	26	9	628059	4563		02	08	90				1	50	25	00	00	12501	5038	17	4008 4008 4008 4008 *** *
																					1,394.66
																					24.45
																					185.25
																					1,263.60
																					750.44
																					3,658.40
																					TOTAL

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